**PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)  
FY 2005**

(Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)

Docket Number (Optional)

SONYJP 3.0-781

Application Number

09/863,922-Conf. #1620

Filed

May 23, 2001

For **SOFTWARE PROGRAM STORAGE MEDIUM, SOFTWARE PROGRAM RIGHTS MANAGEMENT  
SYSTEM AND MANAGEMENT METHOD FOR SOFTWARE PROGRAM RIGHTS**

Art Unit

2134

Examiner

D. Y. Jung

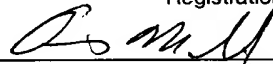
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):

	<u>Fee</u>	<u>Small Entity Fee</u>	
<input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$120	\$60	\$ 120.00
<input type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$450	\$225	\$
<input type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$1020	\$510	\$
<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$1590	\$795	\$
<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$2160	\$1080	\$

☐ Applicant claims small entity status. See 37 CFR 1.27.☐ A check in the amount of the fee is enclosed.☐ Payment by credit card. Form PTO-2038 is attached.☒ The Director has already been authorized to charge fees in this application to a Deposit Account.☒ The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 12-1095. I have enclosed a duplicate copy of this sheet.I am the ☐ applicant/inventor.☐ assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).☒ attorney or agent of record. Registration Number 34,930☐ attorney or agent under 37 CFR 1.34.

Registration number if acting under 37 CFR 1.34 \_\_\_\_\_

  
\_\_\_\_\_  
Signature

February 23, 2006

Date

Dennis M. Smid

Typed or printed name

(908) 654-5000

Telephone Number

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ Total of 1 forms are submitted.

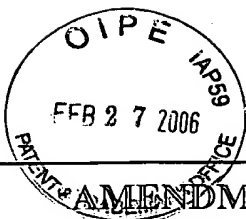
02/28/2006 MAHMED1 00000037 121095 09863922

01 FC:1251 120.00 DA

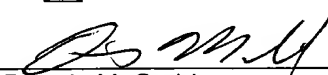
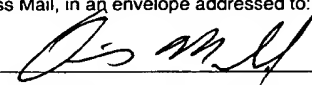
I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being deposited with the U.S. Postal Service on the date shown below with sufficient postage as First Class Mail, in an envelope addressed to: MS AF, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Dated: February 23, 2006

Signature:  (Dennis M. Smid)



27W  
AF#

<b>AMENDMENT TRANSMITTAL LETTER</b>			Docket No. SONYJP 3.0-781		
Application No. 09/863,922-Conf. #1620		Filing Date May 23, 2001		Examiner D. Y. Jung	Art Unit 2134
Applicant(s): Satoru Ueda					
Invention: SOFTWARE PROGRAM STORAGE MEDIUM, SOFTWARE PROGRAM RIGHTS MANAGEMENT SYSTEM AND MANAGEMENT METHOD FOR SOFTWARE PROGRAM RIGHTS					
<b>TO THE COMMISSIONER FOR PATENTS</b>					
Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below.					
<b>CLAIMS AS AMENDED</b>					
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate	
Total Claims	9	- 20 =		x	
Independent Claims	3	- 3 =		x	
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					
Other fee (please specify): Extension for response within first month					120.00
<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:</b>					<b>120.00</b>
<input checked="" type="checkbox"/> Large Entity <input type="checkbox"/> Small Entity					
<input type="checkbox"/> No additional fee is required for this amendment.					
<input checked="" type="checkbox"/> Please charge Deposit Account No. <u>12-1095</u> in the amount of \$ <u>120.00</u> . A duplicate copy of this sheet is enclosed.					
<input type="checkbox"/> A check in the amount of \$ _____ to cover the filing fee is enclosed.					
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.					
<input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. <u>12-1095</u> as described below. A duplicate copy of this sheet is enclosed.					
<input checked="" type="checkbox"/> Credit any overpayment.					
<input checked="" type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.					
 Dennis M. Smid Attorney/Agent Reg. No.: 34,930				Dated: <u>February 23, 2006</u>	
LERNER, DAVID, LITTENBERG, KRUMHOLZ & MENTLIK, LLP 600 South Avenue West Westfield, New Jersey 07090 (908) 518-6316					
I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being deposited with the U.S. Postal Service on the date shown below with sufficient postage as First Class Mail, in an envelope addressed to: MS AF, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.					
Dated: February 23, 2006		Signature:  (Dennis M. Smid)			